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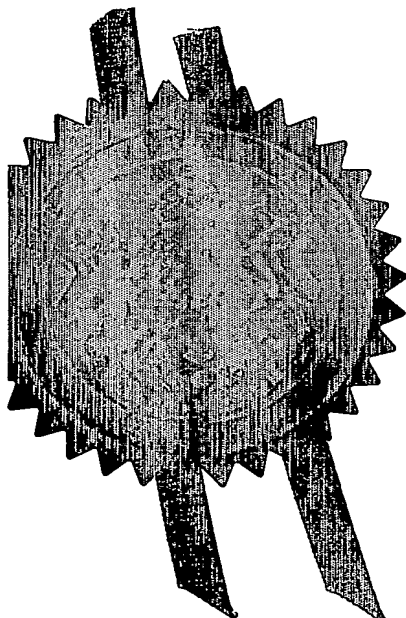
PCT

I, the undersigned, being an officer duly authorised in accordance with Section 74(1) and (4) of the Deregulation & Contracting Out Act 1994, to sign and issue certificates on behalf of the Comptroller-General, hereby certify that annexed hereto is a true copy of the documents as originally filed in connection with the patent application identified therein.

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Signed

Am Breuer

Dated

16 September 2003

30AUG02 E744486-1 D02890
P01/7700 0.00-0220064.0

The Patent Office

Cardiff Road
Newport
South Wales
NP9 1RH

Request for grant of a patent

(See the notes on the back of this form. You can also get an explanatory leaflet from the Patent Office to help you fill in this form)

1. Your reference

REP07284GB

2. Patent application number

(The Patent Office will fill in this part)

29 AUG 2002

0220064.0

3. Full name, address and postcode of the or of each applicant (*underline all surnames*)

Arachnova Therapeutics Ltd.
95 Halkett Place
St. Helier
Jersey
JE1 1BX

08137770001

Patents ADP number (*if you know it*)

If the applicant is a corporate body, give the country/state of its incorporation

Channel Islands

4. Title of the invention

NEW THERAPEUTIC USE

5. Name of your agent (*if you have one*)

Gill Jennings & Every

"Address for service" in the United Kingdom to which all correspondence should be sent (*including the postcode*)

Broadgate House
7 Eldon Street
London
EC2M 7LH

Patents ADP number (*if you know it*)

745002

6. If you are declaring priority from one or more earlier patent applications, give the country and the date of filing of the or of each of these earlier applications and (*if you know it*) the or each application number

Country

Priority application number
(*if you know it*)

Date of filing
(*day / month / year*)

7. If this application is divided or otherwise derived from an earlier UK application, give the number and the filing date of the earlier application

Number of earlier application

Date of filing
(*day / month / year*)

8. Is a statement of inventorship and of right to grant of a patent required in support of this request? (*Answer 'Yes' if:*

YES

- a) any applicant named in part 3 is not an inventor, or
 - b) there is an inventor who is not named as an applicant, or
 - c) any named applicant is a corporate body.
- See note (d))

Patents Form 1/77

9. Enter the number of sheets for any of the following items you are filing with this form. Do not count copies of the same document

Continuation sheets of this form

Description 3

Claim(s) 1

Abstract

Drawing(s)



10. If you are also filing any of the following, state how many against each item.

Priority documents

Translations of priority documents

Statement of inventorship and right to grant of a patent (*Patents Form 7/77*)

Request for preliminary examination and search (*Patents Form 9/77*)

Request for substantive examination (*Patents Form 10/77*)

Any other documents
(please specify)

NO

11. For the applicant
Gill Jennings & Every

I/We request the grant of a patent on the basis of this application.

Signature

Date

29 August 2002

12. Name and daytime telephone number of person to contact in the United Kingdom

PERRY, Robert Edward

020 7377 1377

Warning

After an application for a patent has been filed, the Comptroller of the Patent Office will consider whether publication or communication of the invention should be prohibited or restricted under Section 22 of the Patents Act 1977. You will be informed if it is necessary to prohibit or restrict your invention in this way. Furthermore, if you live in the United Kingdom, Section 23 of the Patents Act 1977 stops you from applying for a patent abroad without first getting written permission from the Patent Office unless an application has been filed at least 6 weeks beforehand in the United Kingdom for a patent for the same invention and either no direction prohibiting publication or communication has been given, or any such direction has been revoked.

Notes

- a) If you need help to fill in this form or you have any questions, please contact the Patent Office on 0645 500505.
- b) Write your answers in capital letters using black ink or you may type them.
- c) If there is not enough space for all the relevant details on any part of this form, please continue on a separate sheet of paper and write "see continuation sheet" in the relevant part(s). Any continuation sheet should be attached to this form.
- d) If you have answered 'Yes' Patents Form 7/77 will need to be filed.
- e) Once you have filled in the form you must remember to sign and date it.
- f) For details of the fee and ways to pay please contact the Patent Office.

NEW THERAPEUTIC USE

Field of the Invention

This invention relates to new uses for a known compound.

Background of the Invention

5 A number of non-tricyclic antidepressants have recently been developed that diminish the cardiovascular and anticholinergic liability characteristic of tricyclic antidepressants. These agents include those which inhibit uptake of serotonin and or noradrenaline. A number of uses has been proposed for these agents including the treatment of obesity and weight gain, Parkinson's disease, epilepsy, schizophrenia,
10 obsessive compulsive disorder, substance abuse and drug addiction, pre-menstrual syndrome, eating disorders and migraines and for the encouragement of smoking cessation. Not all non-tricyclic antidepressants work in all disease/conditions and the relative merits of noradrenaline uptake inhibition to serotonin uptake inhibition for each disease/condition is not clear.

15 (4-(2-Fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine monohydrate hydrochloride is known (see US-A-4695568). It has both serotonin and noradrenergic reuptake blocking properties, but also has important 5HT-3 receptor blocking activity, which would be expected to modify the pharmacological actions of the compound in vivo in a non-predictable manner.

20 Summary of the Invention

Surprisingly, it has been found that the known compound identified above has activity in the treatment of obesity and weight gain, Parkinson's disease, epilepsy, schizophrenia, obsessive compulsive disorder, substance abuse, tobacco smoking (encouraging cessation), pre-menstrual syndrome, eating disorders, migraines, recovery
25 from stroke and cancer chemo and radio induced emesis. Its combination of serotonin and noradrenergic reuptake blockade and 5HT-3 receptor blockade has not previously been clearly identified as being responsible for these activities. It will be appreciated that any suitable form of the active principle may be used, e.g. another salt form, or a prodrug or active metabolite.

30 As used herein, the term "a method for treating obesity or weight gain" means reduction of weight, relief from being overweight, relief from gaining weight, or relief from obesity; all of which are usually due to extensive consumption of food.

As used herein, the term "method of treating Parkinson's disease" means relief from the symptoms of Parkinson's disease which include, but are not limited to, slowly increasing disability in purposeful movement, tremors, bradykinesia, rigidity, and a disturbance of posture in humans.

5 The terms "obsessive-compulsive disorder," "substance abuse," "pre-menstrual syndrome," "eating disorders" and "migraine" are used herein in a manner consistent with their accepted meanings in the art. See, e.g. Diagnostic and Statistical Manual of Mental Disorders 4th Ed, American Psychiatric Association (1997). The terms "method of treating or preventing," "method of treating" and "method of preventing" when used in connection
10 with these disorders mean the amelioration, prevention or relief from the symptoms and/or effects associated with these disorders.

Description of Preferred Embodiments

By means of this invention, the diseases/conditions outlined above can be treated, e.g. controlled or prevented. For this purpose, the active compound can be formulated
15 in any suitable manner together with a conventional diluent or carrier. The active compound is preferably administered by the oral route; other suitable routes of administration include sublingual/buccal, transdermal, intramuscular, intranasal, rectal, parenteral, subcutaneous, pulmonary and topical. An effective dose of the active agent will depend on the nature and degree of the complaint, the age and condition of the patient
20 and other factors known to those skilled in the art. A typical daily dosage may be 0.1 mg to 5 g.

A pharmaceutical composition containing the active ingredient may be in the form of a sublingual tablet or patch. Suitable compositions for oral use include tablets, troches, lozenges, aqueous or oily suspensions, dispersible powders or granules, emulsions, hard
25 or soft capsules, syrups and elixirs. Suitable additives include sweetening agents, flavouring agents, colouring agents and preserving agents. Tablets contain the active ingredient in admixture with non-toxic pharmaceutically acceptable excipients, e.g. inert diluents such as calcium carbonate, sodium carbonate, lactose, calcium phosphate or sodium phosphate; granulating and disintegrating agents, for example corn starch, or
30 alginic acid; binding agents, for example starch, gelatin or acacia, and lubricating agents, for example magnesium stearate, stearic acid or talc. The tablets may be uncoated or they may be coated by known techniques to delay disintegration and absorption in the

gastrointestinal tract and thereby provide a sustained action over a longer period. For example, a time delay material such as glyceryl monostearate or glyceryl distearate may be employed. They may also be coated, to form osmotic therapeutic tablets for controlled release. Hard gelatin capsules may include an inert solid diluent, for example calcium carbonate, calcium phosphate or kaolin; soft gelatin capsules may include water or an oil medium, for example peanut oil, liquid paraffin or olive oil.

CLAIMS

1. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of obesity and weight gain.
- 5 2. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of substance abuse and drug addiction.
3. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the encouragement of smoking
10 cessation.
4. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of pre-menstrual syndrome.
5. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or
15 a salt thereof for the manufacture of a medicament for the treatment of eating disorders.
6. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of migraine.
7. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of Parkinson's
20 disease.
8. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of stroke.
9. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of chemotherapy or
25 radioactivity-induced emesis.
10. Use of (4-(2-fluorophenyl)-6-methyl-2-(1-piperazinyl)thieno[2,3-D]pyrimidine or a salt thereof for the manufacture of a medicament for the treatment of schizophrenia.
11. Use according to any of claims 1 to 10, wherein the salt is the hydrochloride monohydrate.